

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

David A. Stebbins

DEFENDANT

Karl Polano, et al.

4:21-cv-04184-JSW

TYPE OF PROCESS

See below

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Alphabet Inc - Corporation Services Company

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

2710 Gateway Oaks Dr. Suite 150N Sacramento, Ca 95833

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

David A. Stebbins
123 W. Ridge Ave.,
APT D
Harrison, AR 72601Number of process to be
served with this Form 285

5

Number of parties to be
served in this case

1

Check for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Summons, Complaint, Amended Complaint, Order and docket number 12

RECEIVED
United States Marshal

Fold

AUG 04 2021

Northern District of

California - Oakland

Signature of Attorney other Originator requesting service on behalf of:



Susan J. Seong

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE

510-637-3535

DATE

7/1/21

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

5

District of
Origin

No. 11

District to
Serve

No. 97

Signature of Authorized USMS Deputy or Clerk

TROJ 3132

Date

8/4/2021

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Lai Saevang Customer Service Liaison

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

9/10/21

Time

3:40 ☐ am
☒ pm

Signature of U.S. Marshal or Deputy

4071

Service Fee

65

Total Mileage Charges
(including endeavors)

6m x .56

Forwarding Fee

2.00

Total Charges

76.36

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS

3.36

of DUSMS:

1

of hours for all DUSMS:

7

of round trip miles for all vehicles:

6

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED